FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1 Name on | | | | | | | | | | | | | | | | | | |
|---|---|--|---|--|------------------------------|--|--|--|---------|---|---------------------|---|---|---|---|---|---|--|
| 1. Name and Address of Reporting Person* <u>Corona George S</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol KELLY SERVICES INC [KELYA] | | | | | | | | | heck all a | oplicable) ector | | Owner |
| (Last) (First) (Middle) 999 WEST BIG BEAVER ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/01/2014 | | | | | | | | | ^ bel | er (give title Other (sp w) below) utive Vice President & COO | | w) |
| (Street) TROY MI 48084 (City) (State) (Zip) | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Lir | ne) X Fo | dividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tabl | e I - Non | -Deriv | ative | Se | curitie | s Acc | quired, | Dis | posed o | f, or | Bene | eficia | lly Owr | ned | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | Day/Year) if | | ZA. Deemed Execution Date, f any Month/Day/Year) | | Code (| Transaction Dis Code (Instr. 5) | | curities Acquired (A sed Of (D) (Instr. 3, | | | d Secu | nount of rities ficially ed Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | Code | v | Amount (A) (C) | | A) or O) | Price | Tran | saction(s) r. 3 and 4) | | (instr. 4) | |
| Class A Common Stock, Par Value \$1 12/01/2 | | | | | /2014 | 2014 | | | F | | 4,043 | | D | \$15 | .2 | 207,951 | D | |
| | | Та | ble II - D | | | | | | | | sed of, onvertib | | | | Owne | d | | |
| I. Title of Derivative Security Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Da | Date, | 4. Transa Code (8) | | of Deriv Secu Acqu (A) o Disp of (D (Inst | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | 8. Price of Derivative Security (Instr. 5) | e derivative | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses:

George S Corona 12/02/2014 by Wendy Lauzano-Hertz, 12/02/2014 Attorney-in-Fact

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.